Poplar Bluff, MO 63901

MC 135*H115*

RECEIVED

By Carol Day at 9:47 am, Sep 05, 2014

Complete this report in Send copy to Departme							d when	ever instrument is	repaired
ALCO SENSOR IV SN	C000	PRINTER S	N	10 1001000			DATE O	F INSPECTION	
026999 13-18913096 LOCATION OF INSTRUMENT (STREET AND CITY) 501 Faraon St. Joseph MO 64501 CHECKLIST: Place a mark in the box by each item it found to be satisfactory or if oper						ting within establ		1619 INSPECTION 1601 nits. (Write in obse	erved val
ues where determined.) Unmarked items m	ust be corrected	d before	using Instrumer	nt.				
DIGITAL READOU	T (ALL ELEMENTS	OPERATIONAL	.)						
▼ TEMPERATURE O	F ALCO SENSOR (1	O-C - 40-C)							
PRINTER WORKIN	IG PROPERLY				,		****		w
☑ TIME AND DATE D			· · · · · · · · · · · · · · · · · · ·						<u></u>
BREATH ALCOHOL AC	CCURACY STANDA	RDS							
SIMULATOR SOLU	SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE								
⊠ STANDARD SUPPL	STANDARD SUPPLIER Intoximeters LOT # AG300201 EXP. DATE 01-02-2015								
☐ SIMULATOR TEMP	PERATURE (34'C ±	0.2'C)	SIM	ULATOR SN _		SIMUL	ATOR I	EXP DATE	
0.080% STAND		standard soluti BETWEEN 0.0 BETWEEN 0.0	on being 95% an 976% an	i used. (PRINT) d 0.105% INGL d 0.084% INGL	NTUO VISU. VISU,	ATTACHED) E E			
TEST 1 -	.100	TEST 2 -		.099		TEST 3 -		.098	
RFI DETECTOR OPI	ERATING		-						
INDICATE THE NUMBE (DO NOT INCLUDE SEL			LLOWIN	G RANGES SI	NCE.	THE LAST MAIN	TENAN	ICE REPORT:	
REFUSALS 0	(004)	(.0509)	4	(.1014)	8	(.1519)	0	(OVER .19)	0
List any new parts and destablished limits (use of			on that v	vas made to re	store	the instrument to	operat	e satisfactorily ar	d withIn
INSPECTING OFFICER SIGNATURE		7		2		PRINT NAME			
GIGANORE		SAHUS	1/1				Byrom	/Chris McBane	
TYPE II PERMIT NUMBERJEXPIRATI	on date 40241 05-19-2016/2	240303 07-22-2	016	/		TELEPHONE NUMBER	-	71-5359	
Return completed repo	rt to the: Breath Alc			artment of Hea	lth an	d Senior Service			:e

AIGS.

Airgas Mid America (LABORATORY)

3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Test Date: 2-Jan-2013

Dear Sir,

This is your Certificate of Analysis:

Exp. Date 1/2/2015

Cyl. Type 108 Component

Ethanol Nitrogen Certified Concentration

0.100 ± 2% BrAC (272 ppm)

Balance

Lot#

AG300201

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<u>Serial No.</u>	<u>Concentration</u>	Serial No.	Concentration
EB0010581	391.5 ppm	EB0010603	390.9 ppm
EB0010570	258,4 ppm	EB0010559	258,3 ppm
EB0010285	208.9 ppm	EB0010595	209.2 ppm
EB0010561	101.9 ppm	EB0010562	104.9 ppm
EB0010681	63.0 ppm	EB0010579	52.4 ppm

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

Analytical Method:

NDIR



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

WAYNE BRYOM

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE5/19/2014	white
· · · · · · · · ·	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240241	Dal Vacherly
EXPIRES 5/19/2016	
NO 680-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB 4 (R6-10)



Operator BRYOM, WAYNE Permit No 240241

Date Issued 5/19/2014 Date E

Date Expires 5/19/2016